



SUPPLEMENTAL APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	0
Title::	Medicament Compositions Containing Anticholinergically-Effective Compounds and Betamimetics
Attorney Docket Number::	1/1088-3-C2
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	1
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Karl-Heinz
Middle Name::	
Family Name::	BOZUNG
Name Suffix::	
City of Residence::	Mainz
State or Province of Residence::	

Country of Residence :: Germany
Street of mailing address:: Hindemithstrasse 39
City of mailing address:: Mainz
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55127

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Michel
Middle Name::
Family Name:: PAIRET
Name Suffix::
City of Residence:: Stromberg
State or Province of Residence::
Country of Residence:: Germany
Street of mailing address:: August-Gerlach Strasse 22
City of mailing address:: Stromberg
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55442

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Germany
Status:: Full Capacity
Given Name:: Richard
Middle Name::
Family Name:: REICHL
Name Suffix::
City of Residence :: Gau-Aglesheim

State or Province of Residence::

Country of Residence::

Germany

Street of mailing address::

Im Hippel 55

City of mailing address::

Gau-Aglelsheim

State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address::

55435

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Austria

Status::

Full Capacity

Given Name::

Alexander

Middle Name::

Family Name::

WALLAND

Name Suffix::

City of Residence::

Ingelheim am Rhein

State or Province of Residence::

Country of Residence::

Germany

Street of mailing address::

Wilhelm-Leuschner-Strasse 20

City of mailing address::

Ingelheim am Rhein

State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address::

55218

CORRESPONDENCE INFORMATION

Correspondence Customer Number::

28501

REPRESENTATIVE INFORMATION

Representative Customer Number::

28501

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/075,087 <u>10/075,687</u>	February 14, 2002
which is a	Continuation of	09/568,880	May 9, 2000

ASSIGNEE INFORMATION

Assignee name:: Boehringer Ingelheim Pharma KG
Street of mailing address:: Binger Strasse 173
City of mailing address:: Ingelheim
State or Province of mailing address::
Country of mailing address:: Germany
Postal or Zip Code of mailing address:: 55216